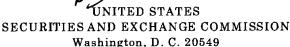
FORM D





FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION



SEC USE ONLY
Prefix Serial
DATE RECEIVED

1300478

Name of Offering Offering of Limit	(□ check if this is an amendment and name and Partnership Interests	has chan	ged, and indicate chan	ge.)	
	es) that apply): 🗆 Rule 504 🗀 Rule 505 🛭	Rule 506	☐ Section 4(6) ☐ U	LOE	
Type of Filing: New 1					
1 Enter the informat	A. BASIC IDENTIFICA ion requested about the issuer	TION DA	<u>ra</u>		
Name of Issuer (c	heck if this is an amendment and name has dermere, L.P.	changed, a	nd indicate change.)		
Address of Executive Office 9020-II Capital of Texas I	s (Number and Street, City, State lighway North, Suite 500, Austin, TX 78759	, Zip Code)	Telephone Number (Inc (512) 671-8008	cluding Area Code)	
Address of Principal Busin (if different from Executive	ess Operations (Number and Street, City, State Offices)	, Zip Code)	Telephone Number (Inc	cluding Area Code)	
Brief Description of Busines Ownership and opera	s tion of shopping center			V PR	— Ocean
Type of Business Organizat	on			ALL	
☐ corporation	🛮 limited partnership, already formed		other (please specify):	\) AU	3 1 3 200 L
□ business trust	□ limited partnership, to be formed			<i>T</i> }	2004 1000-
Actual or Estimated Date Jurisdiction of Incorporati	of Incorporation or Organization: on or Organization: (Enter two-letter U.S. Posta	0	8 0 4 Observiation for State:	Actual □ Estima	ated X

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any opies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (6/99)

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	☑ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or Managing Partner				
Full Name (Last name firs RDR Enterprises, LLC									
Business or Residence Add 9020-II Capital of Texas									
Check Box(es) that Apply:	☑ Promoter	☐ Beneficial Owner	☑ Executive Officer	☐ Director	☐ General and/or Managing Partner				
Full Name (Last name firs Richardson, R. Daniel	t, if individual)								
Business or Residence Address (Number and Street, City, State, Zip Code) 9020-II Capital of Texas Highway North, Suite 500, Austin, TX 78759									
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner				
Full Name (Last name firs RDR Family Limited Pa	rtnership								
Business or Residence Add									
9020-II Capital of Texas Check Box(es) that Apply:		ı, Suite 500, Austin, TX ☐ Beneficial Owner	■ Executive Officer	☐ Director	☐ General and/or Managing Partner				
Full Name (Last name firs Dube, Robert	t, if individual)		•		Managing Farther				
Business or Residence Add 9020-II Capital of Texas									
Check Box(es) that Apply:		☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner				
Full Name (Last name firs	t, if individual)								
Business or Residence Add	ress (Number a	and Street, City, State,	Zip Code)						
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner				
Full Name (Last name firs	t, if individual)								
Business or Residence Add	ress (Number a	and Street, City, State,	Zip Code)						
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner				
Full Name (Last name firs	t, if individual)								
Business or Residence Address (Number and Street, City, State, Zip Code)									
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner				
Full Name (Last name firs	t, if individual)								
Business or Residence Add	ress (Number a	and Street, City, State,	Zip Code)						
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner				
Full Name (Last name firs	t, if individual)								
Business or Residence Address (Number and Street, City, State, Zip Code)									

				D. 1	NFORM	IAIIO	VADO	JI OFF	EKING		· · · · · · · · · · · · · · · · · · ·	Yes	s No
1.	Hae th	o icemor c	ald ar das	e the icen	or intend t	to call to	non-acere	dited inve	etore in t	hic offerin	g?		s 100
1.	IIas in	e issuei s	ora, or acc		also in Ap						6		_
2.	What i	s the min	imum inv									\$ <u>10</u>	,000_
												Yes	
3.	Does tl	ne offerin	g permit je	oint owner	ship of a s	single uni	t?	· · · · · · · · · ·				🗆	☒
	commi offering and/or	ssion or s g. If a pe with a sta	imilar ren rson to be ate or stat	nuneration listed is a es, list the	n for solici n associat name of t	tation of p ed person he broker	purchaser or agent or dealer	s in conne of a broke . If more	ection with r or deale than five (n sales of a r registere 5) persons	r indirectly, securities in ed with the S to be listed or dealer or dealer or	the EC are	
Full N	Vame (1	Last name	e first, if i	ndividual)									
Dusin	.000.07 1	Pasidonas	Address	Numbon	and Ctuant	Cit., St.	ata Zin C	ada)					
Dusin	ess or 1	wesidence	Address	Mumber 8	and Street	, City, Sta	ate, Zip O	oue)					
Name	of Ass	ociated B	roker or D	ealer									
States	s in Wh	ich Perso	n Listed F	Ias Solicit	ed or Inte	nds to Sol	licit Purch	nasers		 			
	(Check	"All State	e" or chec	k individi	ıal States)							ПΑ	ll States
	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	[ID]
	[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]		[MS]	[MO]
	[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]		[OR] [WY]	[PA] [PR]
Busin	ess or l	Residence	Address	(Number a	and Street	, City, Sta	ate, Zip C	ode)					
	CA	1D	1	. 1								····	
Name	oi Ass	ociated B	roker or D	eater									
States	s in Wh	ich Perso	n Listed F	las Solicit	ed or Inte	nds to Sol	licit Purcl	nasers					
	(Check	"All State	es" or chec	k individi	ıal States)							🗆 A	ll State:
	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
	[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
	[MT] [RI]	(NE) (SC)	[NV] [SD]	[NH] [TN]	[NJ] [TX]	(NM) [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]
				ndividual)		(01)	[72]	[723]	[11723]		1112	[11 1]	[1 40]
Busin	ess or	Residence	Address	(Number a	and Street	, City, Sta	ate, Zip C	ode)					
Name	of Ass	ociated B	roker or D	ealer					,,,			-	
States	s in Wh	ich Perso	n Listed I	łas Solicit	ed or Inte	nds to Sol	licit Purcl	nasers		·		· · · · · · · · · · · · · · · · · · ·	
	(Check	"All Stat	es" or chec	k individi	ual States)							□ A	ll State
	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]		[HI]	[ID]
		[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]		[MS]	[MO]
	[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]		[OR]	[PA]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and

already exchanged.

Type of Security Amount Already Aggregate Offering Price Sold Debt Equity \square Common \square Preferred 250.000Partnership Interests _____............. Other (Specify) Total Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Number Aggregate Investors Dollar Amount of Purchases Accredited Investors 250,000 Non-accredited Investors Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C · Question 1. Type of Dollar Amount Type of Offering Security Sold Regulation A Total a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. 400 Legal Fees Engineering Fees Sales Commissions (specify finders' fees separately) Other Expenses (identify) ____filing fees___ 1,000 Total 2,400

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXP	ENSES AND USI	E OF PROCEEDS	
	b. Enter the difference between the aggregate offering price given in response Question 1 and total expenses furnished in response to Part C - Question 4.a. difference is the "adjusted gross proceeds to the issuer."	This	\$1,912,600	
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or be used for each of the purposes shown. If the amount for any purpose is not kn an estimate and check the box to the left of the estimate. The total of the pay must equal the adjusted gross proceeds to the issuer set forth in response Question 4.b above.			
		Payments to Officers, Directors, & Affiliates	Payments To Others	
	Salaries and fees	□ \$	□ \$	
	Purchase of real estate	□ \$	\$	
	Purchase, rental or leasing and installation of machinery and equipment	□ \$		
	Construction or leasing of plant buildings and facilities	□ \$		
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	□ \$		
	Repayment of indebtedness	□ \$		
	Working capital	□ \$		
	Other (specify):	□ \$	□ \$	
	Column Totals	□ \$	⊠ \$ 1,912,600	
	Total Payments Listed (column totals added)	· · · · · · · · · · · · · · · · · · ·		
	Total Payments Listed (column totals added)	⊠ \$ <u>1,9</u>	012,600	
	D. FEDERAL SIGNATURE			
he vrit	issuer has duly caused this notice to be signed by the undersigned duly authori following signature constitutes an undertaking by the issuer to furnish to the Uten request of its staff, the information furnished by the issuer to any non-accide 502.	zed person. If this not J.S. Securities and Ex	change Commission, upo	
Αι	suer (Print or Type) stin Windermere, L.P. Signature	Date	gust 10,2004	
Na	time of Signer (Print or Type) Title of Signer (Print or Type)			
R.	Daniel Richardson President of RDR Enterprises Austin Windermere, L.P.	, LLC, general partne	er of	

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)